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Andi A  
12-2-99  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of )  
RAJEEV KRISHNAMURTHI, ET AL ) For: METHOD AND APPARATUS FOR  
Serial No.: 08/863,457 ) PROVIDING AN ALERT WITH  
 ) INFORMATION SIGNAL  
 ) BETWEEN A MOBILE SWITCHING  
 ) CENTER AND A BASE STATION  
 )  
Filed: May 27, 1997 ) Group Art Unit: 2732

AMENDMENT

Assistant Commissioner of Patents  
BOX FEE AMD  
Washington, D.C. 20231

Attention: C. Nguyen,  
Examiner

Dear Sir:

In response to the Office Action dated August 17, 1999, please amend the application as follows:

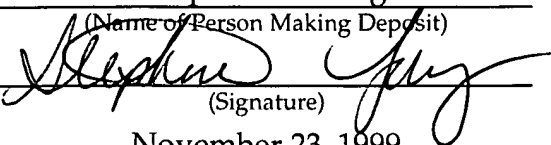
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner of Patents, Washington, D.C. 20231, on:

November 23, 1999

(Date of Deposit)

Stephanie Young

(Name of Person Making Deposit)



(Signature)

November 23, 1999

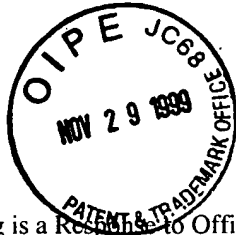
(Date of Signature)

RECEIVED  
DEC - 2 1999  
TECH CENTER 2700

AMENDMENT TRANSMITTAL FORM

Assistant Commissioner for Patents  
Washington, D.C. 20231

Attorney Docket No.: PA377CIP  
In Re Application of: KRISNAMURTHI ET AL  
Serial Number: 08/863,457  
Filed: May 27, 1997  
Examiner: C. Nguyen  
Group Art Unit: 2732



Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application. In addition, the following documents are enclosed:

1. ☒ A Petition for Extension of Time: ( 1 ) month(s).
2. ☐ Information Disclosure Statement (IDS):
  - a. ☐ PTO-1449
  - b. ☐ Copies of IDS Citations (number of citations: )
3. ☐ Other:

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CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	14	20	0	x \$18 =	\$0
Independent**	3	3	0	x \$78 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$260	\$0
EXTENSION FEES		<input checked="" type="checkbox"/> One Month		\$110	\$110
		<input type="checkbox"/> Two Months		\$380	\$0
		<input type="checkbox"/> Three Months		\$870	\$0
INFORMATION DISCLOSURE STATEMENT		<input type="checkbox"/> After First Office Action		\$240	\$0
		<input type="checkbox"/> After Final Office Action		\$130	\$0
TERMINAL DISCLAIMER				\$55	\$0
				TOTAL FEE	\$110

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$110.00.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: November 23, 1999

Signature:

Roger W. Martin, Reg. No. 39,291

QUALCOMM Incorporated  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 845-3536  
Facsimile: (858) 658-2502